

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well ☒ **X**
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Durango, Colorado
(Place)

March 11, 1963
(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Amerada Petroleum Corporation J. Apache "B", Well No. 11, in NE 1/4 NE 1/4,
(Company or Operator) (Lease)

A, Sec. 19, T. 24N, R. 5W, NMPM., Basin Dakota Pool
Unit Letter

Rio Arriba County. Date Spudded 2/15/63 Date Drilling Completed Unit 3/5/63

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

Elevation DF-6508' Total Depth 6665' PBTD 6593'

Top Oil/Gas Pay 6386' Name of Prod. Form. Dakota

PRODUCING INTERVAL -

Perforations Lane-Wells (6428'-6440')(6532'-6548')(6562'-6592')

Open Hole None Depth 6641' Depth 3 1/2" Csg. @ 6641'
Casing Shoe 6641' Tubing Tubingless

OIL WELL TEST - None - Gas Well

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____ Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke
load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____

GAS WELL TEST -

Natural Prod. Test: See Below MCF/Day; Hours flowed _____ Choke Size _____

Tubing, Casing and Cementing Record
Size Feet Sax

9-5/8"	200'	150
3-1/2"	6641'	350
2-1/2" D.V. Tool	@ 2235'	
Cemented with	75	
Tubingless Completion		

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: 1.121 MCF MCF/Day; Hours flowed 5

Choke Size 3/4" Method of Testing: Orifice Well Tester

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and

sand) Sand-Wat. Fractured 70,000# Sand & 75,500 Gals. Water

Casing _____ Tubing _____ Date first new _____
Press. 4500# Press. No oil run to tanks Gas Well-Waiting on sales Conn.

Oil Transporter _____

Gas Transporter El Paso Natural Gas Company

Remarks Drilling completed 2/28/63, well completed W/Well Servicing Unit 3/5/63
Well kicked off and started flowing 3/6/63.

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved MAR 13 1963, 19____

Amerada Petroleum Corporation
(Company or Operator)

OIL CONSERVATION COMMISSION

By: D. F. Furse D. F. Furse
(Signature)

By: Original Signed Emery C. Arnold

Title Production Foreman

Title Supervisor Dist. # 3

Send Communications regarding well to:

Name Amerada Petroleum Corporation

Address Box 1469, Durango, Colorado



STATE OF TEXAS	
OIL COMMISSION	
REGISTRATION	
NUMBER OF CITIES REGISTERED	
SAN ANTONIO	1
EL PASO	2
HOUSTON	
DAVIDSON	
TRANSPORT & OIL	
PROMOTION OFFICE	
OPERATOR	